· 10/003,912

| Under the Paperwork Reduction Act of 1995, no purpose are required to respond to a gollect PATENT APPLICATION FEE DETERMINATION RECOR |  |  |  |                                    |                             |                  |               |                  |                        |           |   |                        |  |
|---|--|--|--|------------------------------------|-----------------------------|------------------|---------------|------------------|------------------------|-----------|---|------------------------|--|
| FOR   |  |  | CLAIMS AS FILED - PART (Cohumn I)  NUMBER FILED    |                                    |                             | (Cohama 2)       |               |                  | SMALL ENTITY           |           | OR SMALL ENTITY                               |                        |  |
|   |  |  |  |                                    | NUMBER EXTRA                |                  |               | RATE             | FEE                    |           | RATE  | FEE                    |  |
| (3) CFE   | BASIC FEE<br>(DICTE LING))<br>TOTAL CLAIMS |  |  |                                    |                             |                  |               |                  | š s                    |           |   | s 74                   |  |
| mon   | (17 CT LIGHT)  INDEPENDENT CLAIMS          |  | 57 minus 20 =                                      |                                    | • 37                        |                  | ]             | z\$              |                        | OR        | x \$_18                                       | 7                      |  |
| (07 CFR   | MULTIPLE DEPENDENT O                       |  | Minus 3-   |                                    | <u> </u>                    |                  | 4             | × 42-            |                        | OR        | x_84-   |                        |  |
|   |  | ADENI CLAIM  | PRESENT  | GT CTR LIME                        | ))                          |                  |               | <u>+</u> -       |                        | OR        | •   |                        |  |
| = If the diff   | ficinence in cod                           |  | ~. <del>~~</del> ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | htma 2                             |                             | ,                |               | TOTAL            |                        | OR        | TOTAL   | 1,40                   |  |
| 6/5   | 2/04                                       | (Cotums 1)   | HAS AS AN  | (Code                              |                             | (Column 3)       | CI            | Shari I          | YIIIN                  | OR        | OTHER SMALL                                   | _                      |  |
| MENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN   |  | NUA<br>PREVI                       | HEST<br>BER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |               | RATE             | ADDI-<br>TIONAL<br>FEE |           | RATE  | ADDI-<br>TIONAL<br>FEE |  |
| Q o   | Total<br>CFR 1.16(c)                       | 65   | Miras  | ** 4                               | 57                          | - 8              | 7[,           | s=               |                        | ÓR        | x \$ 18 -                                     | 144                    |  |
| South Park  | ependent<br>TR 1.1600                      | .5   | Minus  |                                    | 3                           | = 2              |               |                  |                        | OR        | × 86 =  | 170                    |  |
| F   | ERST PRES                                  | ENTATION OF  | MULTIPLE DE  | PENDENT                            | CLAIM                       | (37 GR 1.14(4))  | <b>1</b>   [, |                  |                        | OR        | . 22  | -                      |  |
|   | -  | (Column 1)   |  |                                    |                             |                  | <b>_</b> J [_ | TOTAL            |                        | OR<br>OR  | TOTAL   | 316                    |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN   |  | HIGH<br>NUM<br>PREVIO<br>PAID      | EST<br>BER<br>OUSLY         | PRESENT<br>EXTRA | 7             | RATE             | ADDI-<br>TIONAL<br>FEE |           | RATE  | ADDI-<br>TIONAL<br>PEE |  |
| 2 00  | Total<br>SR (.14(c))                       | . 45   | Mimus  | 6                                  | 5                           |                  | 1             |                  |                        | OR        | : \$ =  |                        |  |
| Inde  | pendent<br>7k (.ta(b))                     | • 5  | Minus  | ***                                | 5                           | - 1              | 11.           | _=               |                        | OR        |   |                        |  |
| 7   | RST PRES                                   | ENTATION OF D  | (VILTIPLE DE                                       | ENDENT (                           | LAIM                        | OT CFR LINCO     | 11            | <u> </u>         |                        | OR        | ·   | 1                      |  |
| 12/13   | 104  | (Column 1)   |  | (Column                            | 2)                          | (Column 3)       | ADE           | TOTAL<br>IT. FEE |                        | ORAD      | TOTAL<br>DIT. FEE                             |                        |  |
| MENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |  | HIGHE<br>NUMI<br>PREVIOU<br>PAID F | BER<br>USĻY                 | PRESENT<br>EXTRA |               | CATE 1           | addi-<br>Tonal<br>Fee  |           | RATE  | ADDI-<br>TIONAL<br>FEB |  |
|   | otol<br>R i.iejep                          | • 7  | Minus  | 6                                  | 5                           | - 1              | 7.5           |                  |                        | OR        | <u>.                                     </u> |                        |  |
|   | R.1.16(kg)                                 | 1  | Minus  | ***                                | 5                           | - 1              | -             |                  | $\neg \neg$            | OR X      |   |                        |  |
| 7 3   | LST PRESE                                  | NTATION OF M   | ULTIPLE DEP  | ENDENT C                           | LAIM (                      | 37 CFR 1.16(40)  | F.            |                  |                        | OR C      |   |                        |  |
| TI ONE "HI  | ighest Num).<br>ehest Numb                 | a 1 is less than the<br>per Previously Paid<br>or Previously Paid<br>Previously Paid F | For IN THIS  | SPACE is to                        | ss than 20,                 |                  | ADD           | TOTAL<br>T. FEE  |                        | OR<br>ADE | TOTAL<br>DIT. FEE                             | ,                      |  |

Burden How Scarment: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

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